PTO/SB/30 (09-04)

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## Request 09/536,205 **Application Number** for 03/27/2000 Filing Date Continued Examination (RCE) KAYLA R. KLINGMAN **Transmittal** First Named Inventor Address to: 2672 Art Unit Mail Stop RCE Commissioner for Patents DANIEL J. CHUNG **Examiner Name** P.O. Box 1450 Alexandria, VA 22313-1450 6836-US Attorney Docket Number

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application

| Request for Continued Examination (R 1995, or to any design application. See   | CE) practice under 37 CFR 1.11   | 4 does not apply to  | o any utility or plant ap<br>the USPTO) on page | plication filed prior to June 8,      |  |  |  |  |
|--|--|----------------------|---|---------------------------------------|--|--|--|--|
| amendments enclosed with the   | er 37 CFR 1.114 Note: If the<br>RCE will be entered in the order<br>any previously filed unentered an  | in which they were   | e filed unless applicant                        | instructs otherwise. If               |  |  |  |  |
|  | Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. |                      |   |                                       |  |  |  |  |
| i. Consider the an   | i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on   |                      |   |                                       |  |  |  |  |
| li Other   |  |                      |   |                                       |  |  |  |  |
| b. Enclosed  |  |                      | •   |                                       |  |  |  |  |
| I Amendment/Re   | ply  | iii Info             | formation Disclosure St                         | tatement (IDS)                        |  |  |  |  |
| ii. Affidavit(s)/ Dec  | daration(s)  | iv. Dtl              | her   |                                       |  |  |  |  |
| 2. Miscellaneous   |  |                      |   |                                       |  |  |  |  |
| a period ofr   | on the above-identified applicating the application on the above-identified of suspension shall  | not exceed 3 months  | s; Fee under 37 CFR 1.17                        |                                       |  |  |  |  |
| The Director is hereb  | 37 CFR 1.17(e) is required by 37 by authorized to charge the follow 20-0352  | ving fees, or credit | any overpayments, to                            | s sheet.                              |  |  |  |  |
| i. RCE fee require   | ed under 37 CFR 1.17(e)  |                      |   |                                       |  |  |  |  |
| ii. Extension of tim   | ne fee (37 CFR 1.136 and 1.17)   |                      |   |                                       |  |  |  |  |
| iii. Other   |  |                      |   |                                       |  |  |  |  |
| b. Check in the amount   | of\$   | en                   | closed  |                                       |  |  |  |  |
| c. Payment by credit ca  | ard (Form PTO-2038 enclosed)   |                      |   | ,                                     |  |  |  |  |
| WARNING: Information on this form card information and authorization of  |  | rd Information sh    | nould not be included                           | on this form. Provide credit          |  |  |  |  |
|  | GNATURE OF APPLICANT, AT   | TORNEY, OR AG        |   |                                       |  |  |  |  |
| Name (Print/Type) Thomas E Leniha  | f. Failo   |                      | Date Registration No.                           | February 25, 2005                     |  |  |  |  |
| Name (Print/Type) Thomas F. Leniha   |  |                      |   | 32,152                                |  |  |  |  |
|  | CERTIFICATE OF MAILI   |                      |   |                                       |  |  |  |  |
| I hereby certify that this correspondence is b<br>addressed to: Mail Stop RCE, Commissioner<br>Office on the date shown below. |  |                      |   |                                       |  |  |  |  |
| Signature Whicken  | Maskey   |                      |   | · · · · · · · · · · · · · · · · · · · |  |  |  |  |
| Name (Print/Type) Marilyn Pashby   |  |                      | Date February 25,                               | 2005                                  |  |  |  |  |

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 09/536,205 TRANSMIT Filing Date 03/27/2000 For FY 2005 First Named Inventor KAYLA R. KLINGMAN **Examiner Name** DANIEL J. CHUNG Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2672 TOTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 6836-US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 20-0352 Deposit Account Name: TEKTRONIX, INC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity Application Type Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 150 250 200 100 1.000 Design 200 100 100 130 50 65 Plant 200 100 300 160 150 80 Reissue 300 150 500 250 600 300 **Provisional** 200 100 0 O 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description

| Each claim over 20 (                               | including Reissu          | es)                |               | 50           | 25            |
|--|---------------------------|--------------------|---------------|--------------|---------------|
| Each independent claim over 3 (including Reissues) |                           | 200                | 100           |              |               |
| Multiple dependent of                              | laims                     | •                  | •             | 360          | 180           |
| Total Claims                                       | Extra Claims              | Fee (\$)           | Fee Paid (\$) | Multiple Dep | endent Claims |
| 20 or HP =   | x                         |                    | <b>=</b>      | Fee (\$)     | Fee Paid (\$) |
| HP = highest number of tota                        | I claims paid for, if gre | eater than 20.     |               | .00          |               |
| <u>indep. Claims</u>                               | Extra Claims              | Fee (\$)           | Fee Paid (\$) |              |               |
| 3 or HP =  | x                         |                    | <b>=</b>      |              |               |
| HP = highest number of inde                        | pendent claims paid for   | or, if greater tha | n 3.          |              |               |

3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof

Fee Paid (\$) - 100 = /50 = (round up to a whole number) x

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): FILING REQUEST FOR CONTINUED EXAMINATION (RCE)

790.00

| SUBMITTED BY      |                   |  |                        |  |
|-------------------|-------------------|--|------------------------|--|
| Signature         | Though G. Lembon  | Registration No. (Attorney/Agent) 32,152 | Telephone 503-627-7266 |  |
| Name (Print/Type) | Thomas F. Lenihan |  | Date February 25, 2005 |  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.** 

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